

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		03/01/00
FEE DETERMINATION		21	3/13/00
O.I.P.E. CLASSIFIER		59883	4-21-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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33	✓ ✓ ✓
34	✓
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36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓ ✓ ✓

Claim	Date
51	✓ ✓ ✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
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76	✓ ✓ ✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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